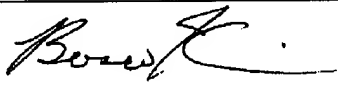
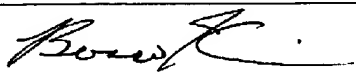


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TRANSMITTAL FORM	Application No.	09/844,925
	Filing Date	April 26, 2001
	First Named Inventor	Richard Levenberg
	Art Unit	2141
	Examiner	Shingles, Kristie
Total Number of Pages in This Submission 15		Attorney Docket Number 3542.PALM.PSI

ENCLOSURES (check all that apply)				
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declarations <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application Response to Missing <input type="checkbox"/> Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): _____		
<table border="1" style="width: 100%;"> <tr> <td style="width: 150px;">REMARKS</td> <td></td> </tr> </table>			REMARKS	
REMARKS				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT				
Firm or Individual Name	Bosco B. Kim			
Signature				
Date	February 24, 2006			

CERTIFICATE OF TRANSMISSION/MAILING			
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